

a. Is this an original filing? Yes [X] No []

State the amendment number.....
 Date filed
 Number of pages attached.......

b. If no,

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2018 OF THE CONDITION AND AFFAIRS OF THE

Aetna Health Inc. (a Michigan corporation)

NAIC Gro	up Code 0001 (Current)	0001 NAIC Company Co (Prior)	ode <u>95756</u> Employer's II	D Number 23-2861565
Organized under the Laws of _			, State of Domicile or Port of Er	ntry MI
Country of Domicile		United State	es of America	
Licensed as business type:		Health Maintena	nce Organization	
Is HMO Federally Qualified? Yes	[] No[X]			
Incorporated/Organized	09/10/1990	6	Commenced Business	04/01/1998
Statutory Home Office	28588 Northwestern I	lighway. Suite 100		Southfield, MI, US 48034
	(Street and		(City or	Town, State, Country and Zip Code)
Main Administrative Office			Highway, Suite 100	
So	uthfield, MI, US 48034	(Street an	d Number)	248-357-7766
(City or Tov	vn, State, Country and Zi	Code)	(Α	rea Code) (Telephone Number)
Mail Address 2	8588 Northwestern Highy Street and Number or		(City or	Southfield, MI, US 48034 Town, State, Country and Zip Code)
Primary Lagation of Books and Br	,	·	Meeting Road	, , , , , , , , , , , , , , , , , , ,
Primary Location of Books and Re			d Number)	
	Blue Bell, PA 19422 vn, State, Country and Zi	o Code)	(A	800-872-3862 rea Code) (Telephone Number)
Internet Website Address	,	·	etna.com	
Statutory Statement Contact		ara S. Mullen		215-775-6508
· ·		(Name)		(Area Code) (Telephone Number) 860-262-7767
Aetna.	HMOReporting@aetna.c (E-mail Address)	om		(FAX Number)
		OFFI	CERS	
	sident Kris		Vice President and	d Treasurer John Patrick Maroney
Vice President and Sec	retary Edwa	ard Chung-I Lee		
			HER	
Kevin James Casey, S Timothy James Olson, Princip	Senior Investment Officer al Financial Officer & Cor		ronister III, Assistant Controller	# Gregory Stephen Martino, Vice President Scott Leland Spradlin, Senior Medical Director
		DIRECTORS	OR TRUSTEES	
Suzanne Ma	ie Hall		Nyers Peng	Scott Leland Spradlin
above, all of the herein described this statement, together with relat of the condition and affairs of the completed in accordance with the (2) that state rules or regulations belief, respectively. Furthermore	assets were the absolute ed exhibits, schedules are said reporting entity as	e property of the said reporting d explanations therein contain of the reporting period stated t instructions and Accounting porting not related to accoun- tation by the described officer	g entity, free and clear from any ned, annexed or referred to, is a above, and of its income and d Practices and Procedures mar ting practices and procedures, is also includes the related corr	d reporting entity, and that on the reporting period stated lilens or claims thereon, except as herein stated, and that a full and true statement of all the assets and liabilities and eductions therefrom for the period ended, and have been nual except to the extent that: (1) state law may differ; or, according to the best of their information, knowledge and esponding electronic filing with the NAIC, when required, if filing may be requested by various regulators in lieu of or
- Vum / V Dr	2		Shive II or	John Patrick Maroney
Kristin Mydrs Þe President	erig		Chung-I Lee nt and Secretary	Vice President and Treasurer
State of Pennsylvania County of Montgomery		State of Connecticut County of Hartford		State of Connecticut County of Hartford
Subscribed and sworn to before r		Subscribed and sworn to	before me this	Subscribed and sworn to before me this
24 day of October	, 2018	294 May of Oct	-e by , 2018	1 day of Nocember, 2018
//		(David	& Distro	
NOTARY PUBLIC (Seal)		NOTARY PUBLIC (Seal)		NOTARY PUBLIC (Seal)
COMMONWEALTH OF PER NOTARIAL SEAS KIM E. ROTH, Notary Whitpain Township, Montge My Commission Expires Apr	Public county	NOTARY PUBLIC (Seal)	NE CONTINUE OF THE STATE OF THE	DIANE M COLLAZO Notary Public, State of Connecticut My Commission Expires Aug. 31, 202 his an original filing?

ASSETS

	-		Current Statement Date		4
		1	2	3 Net Admitted Assets	December 31 Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds	1, 150, 595	0	1, 150, 595	1, 151,228
2.	Stocks:				
	2.1 Preferred stocks			0	0
	2.2 Common stocks	0	0	0	0
3.	Mortgage loans on real estate:				
	3.1 First liens				0
	3.2 Other than first liens	0	0	0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less \$				
	encumbrances)	0	0	0	0
	4.2 Properties held for the production of income (less				
	\$0 encumbrances)	0	0	0	0
	4.3 Properties held for sale (less \$0				
	encumbrances)	0	0	0	0
5.	Cash (\$0), cash equivalents				
	(\$383,663) and short-term				
	investments (\$0)	383,663	0	383,663	376,422
6.	Contract loans (including \$0 premium notes)	0	0	0	0
7.	Derivatives	0	0	0	0
8.	Other invested assets	0	0	0	0
9.	Receivables for securities			0	0
10.	Securities lending reinvested collateral assets			0	0
11.	Aggregate write-ins for invested assets				0
12.	Subtotals, cash and invested assets (Lines 1 to 11)				
13.	Title plants less \$				
	only)	0	0	0	0
14.	Investment income due and accrued				476
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0	0
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$0				
	earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$0)	0	0	0	0
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	0	0	0	0
	16.2 Funds held by or deposited with reinsured companies		0	0	0
	16.3 Other amounts receivable under reinsurance contracts			0	0
17.	Amounts receivable relating to uninsured plans	0	0	0	0
18.1	Current federal and foreign income tax recoverable and interest thereon	0	0	0	3,712
			0	0	0
19.	Guaranty funds receivable or on deposit		0	0	0
20.	Electronic data processing equipment and software		0	0	0
21.	Furniture and equipment, including health care delivery assets				
	(\$	0	0	0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23.	Receivables from parent, subsidiaries and affiliates			0	0
24.	Health care (\$				0
25.	Aggregate write-ins for other than invested assets			0	0
26.	Total assets excluding Separate Accounts Segregated Accounts and				
20.	Protected Cell Accounts (Lines 12 to 25)	1,537,229	0	1,537,229	1,531,838
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28.	Total (Lines 26 and 27)	1,537,229	0	1,537,229	1,531,838
	DETAILS OF WRITE-INS	, , , , ,		, ,	, , , ,
1101.	DETAILS OF WHITE HIS	n	0	0	0
1101.			0	0	0
			0	0	0
1103. 1198.	Summary of remaining write-ins for Line 11 from overflow page		0	0	0
	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
1199.	·		0	0	0
2501.			0		
2502.				0	0
2503.	0		0	0	0
2598.	Summary of remaining write-ins for Line 25 from overflow page		0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0	0	0

LIABILITIES, CAPITAL AND SURPLUS

	LIADILITIES, CAP		Current Period	<u> </u>	Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
	Claims unpaid (less \$0 reinsurance ceded)			0	0
	Accrued medical incentive pool and bonus amounts		0	0	0
	Jnpaid claims adjustment expenses	0	0	0	0
4. /	Aggregate health policy reserves, including the liability of				
	\$0 for medical loss ratio rebate per the Public				
	Health Service Act	0	0	0	0
5. /	Aggregate life policy reserves	0	0	0	0
6. F	Property/casualty unearned premium reserve	0	0	0	0
7. /	Aggregate health claim reserves	0	0	0	0
8. F	Premiums received in advance	0	0	0	0
9. (General expenses due or accrued	130	0	130	130
10.1 (Current federal and foreign income tax payable and interest thereon				
(including \$0 on realized gains (losses))	1,081	0	1,081	0
1	Net deferred tax liability			0	0
	Ceded reinsurance premiums payable			0	0
	Amounts withheld or retained for the account of others			0	
	Remittances and items not allocated			0	0
	Borrowed money (including \$0 current) and				
	nterest thereon \$0 (including				
"	· · · · · · · · · · · · · · · · · · ·	0	0	0	0
15	\$			0	0 6,477
					· ·
	Derivatives			0	0
1	Payable for securities			0	0
	Payable for securities lending	0	0	0	0
	Funds held under reinsurance treaties (with \$0				
	authorized reinsurers, \$0 unauthorized				
	reinsurers and \$	0	0	0	0
20. F	Reinsurance in unauthorized and certified (\$0)				
	companies		0	0	0
	Net adjustments in assets and liabilities due to foreign exchange rates		0	0	0
22. l	Liability for amounts held under uninsured plans	0	0	0	0
23. <i>A</i>	Aggregate write-ins for other liabilities (including \$				
1	current)			0	0
24.	Total liabilities (Lines 1 to 23)	1,658	0	1,658	6,607
25. /	Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. (Common capital stock	XXX	XXX	10	10
27. F	Preferred capital stock	XXX	XXX	0	0
28. (Gross paid in and contributed surplus	XXX	XXX	8,599,990	8,599,990
29. 3	Surplus notes	XXX	XXX	0	0
30.	Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
	Jnassigned funds (surplus)	XXX			(7,074,769)
32. l	Less treasury stock, at cost:				
3	32.10 shares common (value included in Line 26				
	\$	xxx	XXX	0	0
3	32.20 shares preferred (value included in Line 27				
	\$0)	XXX	XXX	0	0
33.	Fotal capital and surplus (Lines 25 to 31 minus Line 32)		xxx	1,535,571	
	Fotal liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	1,537,229	1,531,838
	DETAILS OF WRITE-INS			.,,===	1,001,101
2301.		0	0	0	_
2301.			0	٠	
					0
2303.	Summary of remaining write-ins for Line 23 from overflow page		0	0	0
			0	0	0
	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	0	0	0	0
2501.				0	ļ0
2502.					0
2503.					0
	Summary of remaining write-ins for Line 25 from overflow page	XXX			<u> </u> 0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.		XXX		0	0
3002.		XXX		0	0
3003.		XXX	XXX	0	0
3098.	Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099.	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

		Current To Da		Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months	XXX	0	0	0
2.	Net premium income (including \$0 non-health				
	premium income)	XXX	0	0	0
3.	Change in unearned premium reserves and reserve for rate credits	XXX	0	0	0
4.	Fee-for-service (net of \$	XXX			0
5.	Risk revenue			0	0
6.	Aggregate write-ins for other health care related revenues				0
7.	Aggregate write-ins for other non-health revenues				0
8.	Total revenues (Lines 2 to 7)	XXX	0	0	0
	Hospital and Medical:				
9.	Hospital/medical benefits				0
10.	Other professional services			0	0
11.	Outside referrals			0	0
12.	Emergency room and out-of-area Prescription drugs				0
13.	Aggregate write-ins for other hospital and medical				0
14. 15.	Incentive pool, withhold adjustments and bonus amounts				0
16.	Subtotal (Lines 9 to 15)				0
10.	Less:		(2,010)		
17.	Net reinsurance recoveries		0	n	0
18.	Total hospital and medical (Lines 16 minus 17)				0
19.	Non-health claims (net)				0
20.	Claims adjustment expenses, including \$0 cost				
	containment expenses	0	0	0	0
21.	General administrative expenses	0	498	569	728
22.	Increase in reserves for life and accident and health contracts				
	(including \$0 increase in reserves for life only)				0
23.	Total underwriting deductions (Lines 18 through 22)				728
24.	Net underwriting gain or (loss) (Lines 8 minus 23)				(728)
25.	Net investment income earned	0	11,567	8,895	12,215
26.	Net realized capital gains (losses) less capital gains tax of	_		_	_
	\$0			0	0
27.	Net investment gains (losses) (Lines 25 plus 26)		11,567	8,895	12,215
28.	Net gain or (loss) from agents' or premium balances charged off [(amount				
	recovered \$0) (amount charged off \$0)]	0	0	0	0
29.	Aggregate write-ins for other income or expenses	0	0	0	0
30.	Net income or (loss) after capital gains tax and before all other federal				
00.	income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	13,088	8,326	11,487
31.	Federal and foreign income taxes incurred	XXX	2,748	2,913	4,021
32.	Net income (loss) (Lines 30 minus 31)	XXX	10,340	5,413	7,466
	DETAILS OF WRITE-INS				
0601.		XXX	0	0	0
0602.		XXX	0	0	0
0603.		XXX	0	0	0
0698.	Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.		XXX	0	0	0
0702.		XXX	0	0	0
0703.		XXX	0	0	0
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.		0	0	0	0
1402.		0	0	0	0
1403		0	0	0	0
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901.		0	0	0	0
2902.		0	0	0	0
2903		0	0	0	0
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EX	L LIASES (Continue	3
		Current Year to Date	Prior Year to Date	Prior Year Ended December 31
	CARITAL AND SURBLUS ASSOCIAT			
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year			
34.	Net income or (loss) from Line 32			
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$			
37.	Change in net unrealized foreign exchange capital gain or (loss)	0	0	0
38.	Change in net deferred income tax	0	0	0
39.	Change in nonadmitted assets	0	0	0
40	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles.	0	0	0
44.	Capital Changes:			
	44.1 Paid in	0	0	0
	44.2 Transferred from surplus (Stock Dividend)	0	0	0
	44.3 Transferred to surplus			0
45.	Surplus adjustments:			
	45.1 Paid in	0	0	0
	45.2 Transferred to capital (Stock Dividend)		0	0
			0	_
	45.3 Transferred from capital	-		0
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus		0	0
48.	Net change in capital & surplus (Lines 34 to 47)		5,413	,
49.	Capital and surplus end of reporting period (Line 33 plus 48)	1,535,571	1,523,178	1,525,231
	DETAILS OF WRITE-INS			
4701.		0	0	0
4702.		0	0	0
4703.		0	0	0
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

CASH FLOW

	CASTIFLOW		0	0
		Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	0	0	0
2.	Net investment income	9,705	7,024	13,047
3.	Miscellaneous income	0	0	0
4.	Total (Lines 1 to 3)	9,705	7,024	13,047
5.	Benefit and loss related payments	(2,019)	0	0
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions	498	569	598
8.	Dividends paid to policyholders	0	0	0
9.	Federal and foreign income taxes paid (recovered) net of \$0 tax on capital			
	gains (losses)	(2,045)	1,925	8,402
10.	Total (Lines 5 through 9)	(3,566)	2,494	9,000
11.	Net cash from operations (Line 4 minus Line 10)	13,271	4,530	4,047
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	0	0	0
	12.2 Stocks	0	0	0
	12.3 Mortgage loans	0	0	0
	12.4 Real estate		0	0
	12.5 Other invested assets		0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		0	0
	12.7 Miscellaneous proceeds	0	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	0	0	0
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	0	0	0
			0	0
	13.3 Mortgage loans		0	0
	13.4 Real estate	0	0	0
		0	0	0
	13.6 Miscellaneous applications	0	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	0	0	0
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	0	0	0
10.	The cool from invocationic (Line 12.5 minute Line 16.7 and Line 17)		<u> </u>	
16	Cash provided (explicitly)			
16.	Cash provided (applied):		0	0
	16.1 Surplus notes, capital notes		-	0
	16.2 Capital and paid in surplus, less treasury stock		0	0
	16.3 Borrowed funds		0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		0	0
	16.5 Dividends to stockholders		0	0
	16.6 Other cash provided (applied)	(6,030)	3,815	8,769
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(6,030)	3,815	8,769
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	7,241	8,345	12,816
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year	376,422	363,606	363,606
	19.2 End of period (Line 18 plus Line 19.1)	383,663	371,951	376,422

Note: Supplemental disclosures of cash flow information for non-cash transactions:		

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Compreh (Hospital &	ensive Medical)	4	5	6	7	8	9	10
		2	3	Medicare	Vision	Dental	Federal Employees Health Benefit	Title XVIII	Title XIX	
	Total	Individual	Group	Supplement	Only	Only	Plan	Medicare	Medicaid	Other
Total Members at end of:										
1. Prior Year	0	0	0	0	0	0	0	0	0	
2. First Quarter	0	0	0	0	0	0	0	0	0	
3. Second Quarter	0	0	0	0	0	0	0	0	0	
4. Third Quarter	0	0	0	0	0	0	0	0	0	
5. Current Year	0	0	0	0	0	0	0	0	0	
6. Current Year Member Months	0	0	0	0	0	0	0	0	0	
Total Member Ambulatory Encounters for Period:										
7 Physician	0	0	0	0	0	0	0	0	0	
8. Non-Physician	0	0	0	0	0	0	0	0	0	
9. Total	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0	0	0	0	0	0	0	0	0	
11. Number of Inpatient Admissions	0	0	0	0	0	0	0	0	0	
12. Health Premiums Written (a)	0	0	0	0	0	0	0	0	0	
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	
15. Health Premiums Earned	0	0	0	0	0	0	0	0	0	
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	
17. Amount Paid for Provision of Health Care Services	(2,019)	0	(2,044)	0	0	0	0	25	0	
18. Amount Incurred for Provision of Health Care Services	(2,019)	0	(2,044)	0	0	0	0	25	0	

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpai	d Claims					
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)						
						
					+	
					+	
						
					T	
					 	
					T	
					-	
						
						
					-	
					+	
000000 4						
0299999 Aggregate accounts not individually listed-uncovered						
0399999 Aggregate accounts not individually listed-covered 0499999 Subtotals						
U49999 Subtotals						
0599999 Unreported claims and other claim reserves						
0699999 Total amounts withheld						
0799999 Total claims unpaid						
0899999 Accrued medical incentive pool and bonus amounts						

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLA	NIMS UNPAID - PRIOR YEAR - NET OF REINSU				T	
	Claims		Liab		5	6
	Year to		End of Curre	ent Quarter		
Line of Business	On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
Comprehensive (hospital and medical)	0	(2,044)	0	0	0	
Medicare Supplement	0	0	0	0	0	
3. Dental Only	0	0	0	0	0	
4. Vision Only	0	0	0	0	0	
5. Federal Employees Health Benefits Plan	0	0	0	0	0	
6. Title XVIII - Medicare	0	25	0	0	0	
7 Title XIX - Medicaid	0	0	0	0	0	
8. Other health	0	0	0	0	0	
9. Health subtotal (Lines 1 to 8)	0	(2,019)	0	0	0	
10. Healthcare receivables (a)	0	0	0	0	0	
11. Other non-health	0	0	0	0	0	
12. Medical incentive pools and bonus amounts	0	0	0	0	0	
13. Totals (Lines 9-10+11+12)	0	(2,019)	0	0	0	

NOTES TO FINANCIAL STATEMENTS

Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying statutory financial statements of Aetna Health Inc. (an Michigan corporation) ("the Company"), indirectly a wholly-owned subsidiary of Aetna Inc. ("Aetna"), have been prepared in conformity with accounting practices prescribed or permitted by the Michigan Department of Insurance and Financial Services ("Michigan Department") ("Michigan Accounting Practices"). The Michigan Department recognizes only statutory accounting practices prescribed or permitted by the State of Michigan for determining and reporting the financial condition and results of operations of an insurance company, which include accounting practices and procedures adopted by the National Association of Insurance Commissioners' ("NAIC") Accounting Practices and Procedures Manual ("NAIC SAP").

A reconciliation of the Company's net income and surplus between NAIC SAP and practices prescribed and permitted by the State of Michigan for the periods ended September 30, 2018 and December 31, 2017 is as follows:

		SSAP#	F/S Page	F/S Line #	2018	2017
NET IN	ICOME	00/ ti #	i age	LIIIO II	2010	2017
(1) (2)	State basis (Page 4, Line 32, Columns 2 & 4) State Prescribed Practices that increase/(decrease) NAIC SAP:	XXX	XXX	XXX	10,340	7,466
(3)	None State Permitted Practices that increase/(decrease) NAIC SAP:					
	None			-	·	
(4)	NAIC SAP (1-2-3=4)	XXX	XXX	XXX	10,340	7,466
SURPL	LUS					
(5) (6)	State basis (Page 3, Line 33, Columns 3 & 4) State Prescribed Practices that increase/(decrease) NAIC SAP:	XXX	XXX	XXX	1,535,571	1,525,231
(7)	None State Permitted Practices that increase/(decrease) NAIC SAP:					
	None			_	· ·	
(8)	NAIC SAP (5-6-7=8)	XXX	XXX	XXX	1,535,571	1,525,231

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of these financial statements in conformity with Michigan Accounting Practices requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and revenues and expenses. Actual results could differ from those estimates.

C. Accounting Policies

(1) through (5) - No significant change.

(6) Securities Lending

The Company engages in securities lending by lending certain securities from its investment portfolio to other institutions for short periods of time. Borrowers must post cash collateral in the amount of 102% to 105% of the fair value of a loaned security. The fair value of the loaned securities is monitored on a daily basis, with additional collateral obtained or refunded as the fair value of the loaned securities fluctuates. The collateral is retained and invested by a lending agent according to the Company's guidelines to generate additional investment income for the Company. Pursuant to Statements of Statutory Accounting Principles ("SSAP") No. 103R - *Transfers and Servicing of Financial Assets and Extinguishments of Liabilities* ("SSAP No. 103R"), collateral required under the Company's securities lending program is carried on the Company's Statutory Statements of Assets and Liabilities, Capital and Surplus as both a receivable and payable. Also pursuant to SSAP No. 103R, if the collateral received from a counterparty is less than 100 percent at the reporting date, the difference between the actual collateral and 100 percent is nonadmitted. Collateral value is measured and compared to the loaned securities in aggregate by counterparty. The Company did not have any loaned securities at September 30, 2018.

(7) through (21) - No significant change.

D. Going Concern

As of November 13, 2018, management has evaluated whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern and management has determined that it is not probable that the Company will be unable to meet its obligations as they become due within one year after the financial statements are available to be issued. Management will continuously evaluate the Company's ability to continue as a going concern and will take appropriate action and will make appropriate disclosures if there is any change in any condition or events that would raise substantial doubt about the Company's ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors

The Company did not have any accounting changes or corrections of errors in the period ended September 30, 2018

3. <u>Business Combinations and Goodwill</u>

No significant change.

4. <u>Discontinued Operations</u>

No significant change.

5. <u>Investments</u>

A. - C: No significant change.

D. Loan-Backed Securities

- (1) Prepayment assumptions for single class and multi-class mortgage backed/asset backed securities were obtained from industry market sources.
- (2) The Company had no other-than-temporary impairment ("OTTI") losses during the third quarter of 2018 on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in accordance with Statements of Statutory Accounting Principles ("SSAP") No. 43R, Loan-Backed and Structured Securities.
- (3) The Company had no recognized OTTI on loan-backed and structured securities currently held, in which the present value of cash flows expected to be collected is less than the amortized cost basis, at the reporting date September 30, 2018.
- (4) The Company had no unrealized loss position on loan-backed and structured securities held by the Company at September 30, 2018.
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
 - (1) and (2): No significant change.
 - (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of September 30, 2018.
 - (4) through (7): No significant change.
- F. The Company did not have any repurchase agreements transactions accounted for as secured borrowing at September 30, 2018.
- G. The Company did not have any reverse repurchase agreements transactions accounted for as secured at September 30, 2018.
- H. The Company did not have any repurchase agreements transactions accounted for as a sale at September 30, 2018.
- I. The Company did not have any reverse repurchase agreements transactions accounted for as a sale at September 30, 2018.
- J. through L.: No significant change.

- M. The Company did not have any working capital finance investments at September 30, 2018.
- N. The Company did not have any offsetting and netting of financial assets or liabilities at September 30, 2018.
- O. through R.: No significant change.
- 6. <u>Joint Ventures, Partnerships and Limited Liability Companies</u>

No significant change.

7. <u>Investment Income</u>

No significant change.

8. <u>Derivative Instruments</u>

No significant change.

9. <u>Income Taxes</u>

No significant change.

10. <u>Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties</u>

No significant change.

- 11. <u>Debt</u>
 - A. The Company did not have any items related to debt, including capital notes at September 30, 2018.
 - B. The Company did not have any Federal Home Loan Bank agreements at September 30, 2018.
- 12. <u>Retirement Plans, Deferred Compensation Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans</u>

The Company did not have a retirement plan, deferred compensation plan, or other postretirement benefit plan at September 30, 2018.

13. <u>Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations</u>

No significant change.

14. <u>Liabilities, Contingencies and Assessments</u>

No significant change.

15. Leases

No significant change.

16. <u>Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk</u>

No significant change.

- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
 - A. <u>Transfers of Receivables Reported as Sales</u>

No significant change.

- B. <u>Transfer and Servicing of Financial Assets</u>
 - (1) No significant change.
 - (2) and (3): The Company did not have any servicing assets or liabilities at September 30, 2018.
 - (4) The Company did not have any securitized financial assets at September 30, 2018.
 - (5) through (7): No significant change.

C. Wash Sales

- (1) The Company did not have any wash sales for the period ended September 30, 2018.
- Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans
 No significant change.
- 19. <u>Direct Premium Written/Produced by Managing General Agents/Third Party Administrators</u>

No significant change.

20. Fair Value Measurements

A. and B.

The Company had no material assets or liabilities measured and reported at fair value at September 30, 2018.

- C. Certain of the Company's financial instruments are measured at fair value in the financial statements. The fair values of these instruments are based on valuations that include inputs that can be classified within one of three levels of a hierarchy established by U.S. generally accepted accounting principles. The following are the levels of the hierarchy and a brief description of the type of valuation information ("inputs") that qualifies a financial asset or liability for each level:
 - Level 1 Unadjusted quoted prices for identical assets or liabilities in active markets.
 - **Level 2** Inputs other than Level 1 that are based on observable market data. These include: quoted prices for similar assets in active markets, quoted prices for identical assets in inactive markets, inputs that are observable that are not prices (such as interest rates and credit risks) and inputs that are derived from or corroborated by observable markets.

Level 3 - Developed from unobservable data, reflecting our own assumptions.

Financial assets and liabilities are classified based upon the lowest level of input that is significant to the valuation. When quoted prices in active markets for identical assets and liabilities are available, we use these quoted market prices to determine the fair value of financial assets and liabilities and classify these assets and liabilities as Level 1. In other cases where a quoted market price for identical assets and liabilities in an active market is either not available or not observable, we estimate fair value using valuation methodologies based on available and observable market information or by using a matrix pricing model. These financial assets and liabilities would then be classified as Level 2. If quoted market prices are not available, we determine fair value using broker quotes or an internal analysis of each investment's financial performance and cash flow projections. Thus, financial assets and liabilities may be classified in Level 3 even though there may be some significant inputs that may be observable.

The carrying values and estimated fair values of the Company's financial instruments at September 30, 2018 were as follows:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)	Net Asset Value (NAV) Included in Level 2
Bonds, Short Term, and Cash Equivalents	1,520,575	1,534,258	1,517,703	2,872	-	-	-

There were no material realized and unrealized capital gains, purchases, sales, settlements, or transfers into or out of the Company's Level 3 financial assets at September 30, 2018. There were no transfers between the Company's Level 1 or 2 financial assets at September 30, 2018.

In evaluating the Company's management of interest rate and liquidity risk and currency exposures, the fair values of all assets and liabilities should be taken into consideration, not only those presented above.

D. The Company did not have any financial instruments where it was not practicable to estimate the fair value.

21. Other Items

No significant change.

22. Events Subsequent

A. Type I - Recognized Subsequent Events

Subsequent events have been considered through November 13, 2018 for the statutory statement issued on November 14, 2018.

The Company had no known reportable recognized subsequent events.

B. Type II - Non-Recognized Subsequent Events

Subsequent events have been considered through November 13, 2018 for the statutory statement issued on November 14, 2018.

The Company had no known reportable non-recognized subsequent events.

23. Reinsurance

No significant change.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. through D: No significant change.

E. Risk Sharing Provisions of the Affordable Care Act

- (1) Did the reporting entity write accident and health insurance premium which is subject to the ACA risk sharing provisions (YES/NO)? Yes [] No [X].
- (2) through (5): Not applicable.

25. Change in Incurred Claims and Claims Adjustment Expenses

There was no material change in incurred claims and claims adjustment expense at September 30, 2018.

26. <u>Intercompany Pooling Arrangements</u>

No significant change.

27. <u>Structured Settlements</u>

No significant change.

28. <u>Health Care Receivables</u>

No significant change.

29. Participating Policies

No significant change.

30. <u>Premium Deficiency Reserves</u>

No significant change.

31. Anticipated Salvage and Subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requiring Domicile, as required by the Model Act?				Yes [] No [X]	
1.2	If yes, has the report been filed with the domiciliary state?				Yes [] No []	
2.1	Has any change been made during the year of this statement in the chreporting entity?				Yes [] No [X]	
2.2	If yes, date of change:						
3.1	Is the reporting entity a member of an Insurance Holding Company Sy is an insurer? If yes, complete Schedule Y, Parts 1 and 1A.				Yes [X] No []	
3.2	Have there been any substantial changes in the organizational chart s	ince the prior quarter end?			Yes [X] No []	
3.3	If the response to 3.2 is yes, provide a brief description of those chang On June 29, 2018, member interest in Medicity LLC and its subsidiarie Health Catalyst. On July 11, 2018, Canadian Insurance Company ch 2018, Aetna Partners Diversified Fund (Cayman) Ltd. was dissolved.	es (Novo Innovations, LLC and Allviant Corporation nanged its name to Aetna Insurance (Hong Kong) L) was transferred imited. On Augu	to st 9,			
3.4	Is the reporting entity publicly traded or a member of a publicly traded	group?			Yes [X] No []	
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code $\frac{1}{2}$	e issued by the SEC for the entity/group			0001	122304	
4.1	Has the reporting entity been a party to a merger or consolidation dur	ing the period covered by this statement?			Yes [] No [X]	
4.2	If yes, provide the name of the entity, NAIC Company Code, and state ceased to exist as a result of the merger or consolidation.	of domicile (use two letter state abbreviation) for a	ny entity that has				
	1 Name of Entity		3 Domicile				
5.	If the reporting entity is subject to a management agreement, including in-fact, or similar agreement, have there been any significant change If yes, attach an explanation.	g third-party administrator(s), managing general agosts regarding the terms of the agreement or principal	ent(s), attorney- s involved?	Yes [] No [X] N/A []
6.1	State as of what date the latest financial examination of the reporting of	entity was made or is being made		····· <u> </u>	12/3	1/2015	
6.2	State the as of date that the latest financial examination report became date should be the date of the examined balance sheet and not the date of the examined balance sheet and the date of the examined balance				12/3	1/2015	
6.3	State as of what date the latest financial examination report became a the reporting entity. This is the release date or completion date of the date).	e examination report and not the date of the examin	ation (balance sh	neet	06/1	4/2017	
6.4 6.5	By what department or departments? Michigan Department of Insurance and Financial Services Have all financial statement adjustments within the latest financial exa statement filed with Departments?	amination report been accounted for in a subsequer	nt financial	Yes [] No [] N/A []	Χ]
6.6	Have all of the recommendations within the latest financial examination	on report been complied with?		Yes [] No [] N/A []	Χ]
7.1	Has this reporting entity had any Certificates of Authority, licenses or revoked by any governmental entity during the reporting period?				Yes [] No [X]	
7.2	If yes, give full information:						
8.1	Is the company a subsidiary of a bank holding company regulated by t	the Federal Reserve Board?			Yes [] No [X]	
8.2	If response to 8.1 is yes, please identify the name of the bank holding	company.					
8.3	Is the company affiliated with one or more banks, thrifts or securities fi	irms?			Yes [] No [X]	
8.4	If response to 8.3 is yes, please provide below the names and location regulatory services agency [i.e. the Federal Reserve Board (FRB), th Insurance Corporation (FDIC) and the Securities Exchange Commiss	e Office of the Comptroller of the Currency (OCC),	the Federal Depo	leral osit			
	1 Affiliate Name	2 Location (City, State)	3 4 FRB OCC	5 FDIC	6 SEC		
	, mind Hallo	zoodio (oity, oidio)	2 000	. 5.5			

GENERAL INTERROGATORIES

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controlled similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	ersonal and professiona	 Yes [X] No []	
9.11	If the response to 9.1 is No, please explain:			
9.2 9.21	Has the code of ethics for senior managers been amended?		 Yes [] No [X]	
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers?		 Yes [] No [X]	
	FINANCIAL			
10.1 10.2	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement lf yes, indicate any amounts receivable from parent included in the Page 2 amount:			
	INVESTMENT			
11.1 11.2	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or ouse by another person? (Exclude securities under securities lending agreements.)		Yes [] No [X]	
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:		\$ 0	
13.	Amount of real estate and mortgages held in short-term investments:			
14.1	Does the reporting entity have any investments in parent, subsidiaries and affiliates?		 Yes [] No [X]	
14.2	If yes, please complete the following:			
		1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value	
	Bonds		\$0	
	Preferred Stock		\$0	
	Common Stock		\$0	
	Short-Term Investments		\$0	
	Mortgage Loans on Real Estate		\$0 \$0	
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)			
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) Total Investment in Parent included in Lines 14.21 to 14.26 above		\$0 \$0	
15.1 15.2	Has the reporting entity entered into any hedging transactions reported on Schedule DB?			

GENERAL INTERROGATORIES

16.	For the reporting entity's secur		•	•			nt date:	¢	
							DL, Parts 1 and 2		
	16.3 Total pa	yable for sec	urities lending reported on the	liability page.			JL, Faits 1 and 2	\$	
17. 17.1	Excluding items in Schedule E offices, vaults or safety deposustodial agreement with a q	- Part 3 - Sp sit boxes, we ualified bank ons, Custodi	necial Deposits, real estate, m re all stocks, bonds and other or trust company in accordar al or Safekeeping Agreement	ortgage loans securities, ow nce with Sections of the NAIC	and investment ned throughout on 1, III - Genera Financial Condi	ts held p the curr al Exami tion Exa	hysically in the reporting entity ent year held pursuant to a nation Considerations, F. miners Handbook?	r's	[X] No []
		1					2		
	State Street Bank and Trust	ne of Custodi Company	an(s)	State Stree	t Financial Cer	nter; On	an Address le Lincoln Street; Boston, M/ 	A 02111-	
17.2	For all agreements that do not location and a complete expl		the requirements of the NAIC	Financial Co	ndition Examine	rs Handl	book, provide the name,		
	1		2				3		
			Location(s)				e Explanation(s)		
	All agreements comply								
17.3 17.4	Have there been any changes If yes, give full information rela		ame changes, in the custodiar	n(s) identified i	n 17.1 during th	e curren	t quarter?	Yes [] No [X]
	1		2		3		4		
	Old Custodian		New Custodian	Dat	e of Change		Reason		
	such. ["that have access to Nar Kevin J. Casey as Sr. Invest	the investment of Firm or the of Firm or the of Firm or the or th	nent accounts"; "handle sec	Affil	ation		yees of the reporting entity, no	ite as	
							(no.	Yes	[] No [X]
	17.5098 For firms/individuals of total assets under ma	unaffiliated w unagement a	ith the reporting entity (i.e. deggregate to more than 50% of	signated with a f the reporting	a "U") listed in the entity's assets?	ne table	for Question 17.5, does the	Yes	[] No [X]
17.6	For those firms or individuals I table below.	isted in the t	able for 17.5 with an affiliation	code of "A" (a	ffiliated) or "U"	(unaffilia	ated), provide the information f	or the	
	1 Central Registration		2		3		4		5 Investment Management Agreement
	Depository Number		ame of Firm or Individual		Entity Identifier		Registered With		(IMA) Filed
							Not registered		
18.1 18.2	Have all the filing requirement If no, list exceptions:								-
19.	b. Issuer or obligor is curre	ary to permit ent on all cor ial expectation	a full credit analysis of the se stracted interest and principal on of ultimate payment of all co	curity does no payments. ontracted inter	exist.	al.		Yes	[] No [X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

	1.1 A&H loss percent					O.	0 %
	1.2 A&H cost containment percent					Q.	0 %
	1.3 A&H expense percent excluding cost containment expenses					Q.	0 %
2.1	Do you act as a custodian for health savings accounts?		Yes []	No [X]	
2.2	If yes, please provide the amount of custodial funds held as of the reporting date	.\$					0
2.3	Do you act as an administrator for health savings accounts?		Yes []	No [X]	
2.4	If yes, please provide the balance of the funds administered as of the reporting date	.\$					0
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?		Yes []	No [X]	
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?		Yes []	No [X]	

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

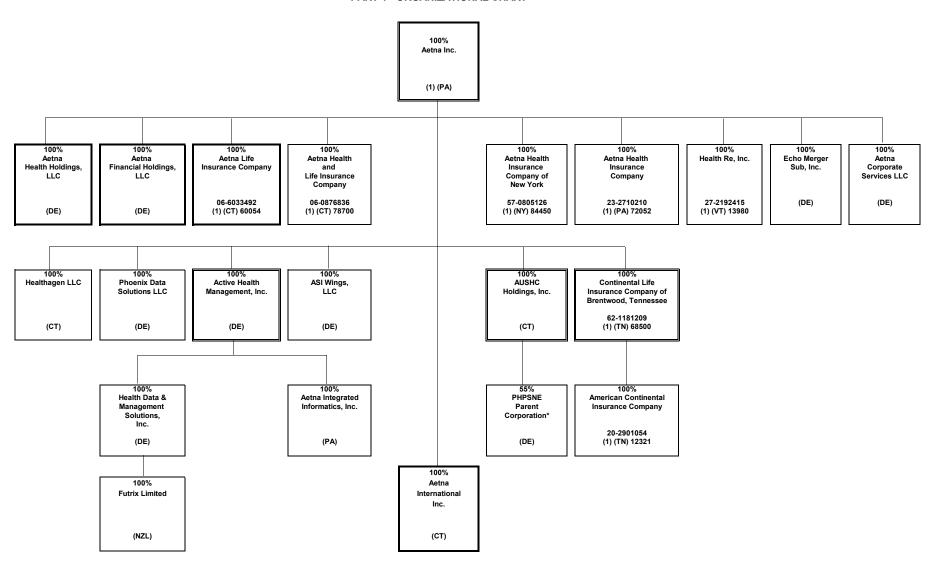
NAIC Certified Date of Type of Type of Reinsurer Certified			Showing All New Reinsura	ince Treaties	 Current Yea 	ar to Date		
NAIC Company ID Effective Date Number Date Name of Reinsurer Date Name of Reinsurer Patricular Patr	1	2	3 4	5	6	7		Effective
	NAIC Company	ID Number	Effective Date Name of Reinsurer	Domiciliary	Type of Reinsurance	Type of Reinsurer	Reinsurer	Certified
NONE	Code	Number	Date Name of Heinsdief	Julisuiction	Ceded	Type of hemsurer	(Tilllough o)	nating
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SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

			2	3	4	Direct Bus 5 Federal Employees Health	6 Life and Annuity	7	8	9
	States, etc.	Active Status (a)	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Benefits Program Premiums	Premiums & Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 7	Deposit-Ty Contract
1.	Alabama AL	N	0	0	0	0	0	0	0	
2.	Alaska AK	N	0	0	0	0	0	0	0	
3.	Arizona AZ	N	0	0	0	0	0	0	0	
4.	Arkansas AR	N	0	0	0	0	0	0	0	
5.	California CA	N	0	0	0	0	0	0	0	
6.	Colorado CO	N	0	0	0	0	0	0	0	
7.	Connecticut CT	N	0	0	0	0	0	0	0	
8.	Delaware DE	N	0	0	0	0	0	0	0	
9.	District of Columbia . DC	N	0	0	0	0	0	0	0	
	Florida FL	N	0	0	0	0	0	0	0	
1.	Georgia GA	N	0	0	0	0	0	0	0	
2.	Hawaii HI	N	0	0	0	0	0	0	0	
3.	Idaho ID	N	0	0	0	0	0	0	0	
4.	Illinois IL	N	0	0	0	0	0	0	0	
5.	Indiana IN	N	0	0	0	0	0	0	0	
6.	lowa IA	N	0	0	0	0	ļ0	0	0	
7.	Kansas KS	N	0	0	0	0	ļ0	0	0	
8.	Kentucky KY	N	0	0	0	0	ļ0	0	0	
9.	Louisiana LA	N	0	0	0	0	ļ0	0	0	
20.	Maine ME	N	0	0	0	0	ļ0	0	0	
21.	Maryland MD	N	0	0	0	0	ļ0	0	J0	l
22.	Massachusetts MA	N	0	0	0	0	ļ0	0	0	
23.	Michigan MI	<u> </u>	0	0	0	0	}0	0	ļ0	
4.	Minnesota MN	N	0	0	0	0	ļ0	0	0	
25.	Mississippi MS	N	0	0	0	0	ļ	0	0	
26.	Missouri MC	N	0	0	0	0	ļ0	0	0	
27.	Montana MT	N	0	0	0	0	ļ0	0	0	
28.	Nebraska NE	N	0	0	0	0	ļ0	0	0	
29.	Nevada NV	N	. 0	0	0	0	ļ0	0	0	
	New Hampshire NH	N	0	0	0	0	ļ0	0	ļ0	
31.	New Jersey NJ	N	0	0	0	0	ļ0	0	0	
2.	New Mexico NM	N	_ 0	0	0	0	ļ0	0	0	ļ
3.	New York NY	N	0	0	0	0	ļ0	0	0	
34. -	North Carolina NC	N	0	0	0	0	ļ0	0	0	
5.	North Dakota ND	N	.+0	0	0	0	ļ0	0	0	
6.	Ohio OH	N	0	0	0	0	ļ0	0	0	
37.	Oklahoma OK	N	0	0	0	0	ļ0	0	0	ļ
	Oregon OR	N	0	0	0	0	ļ0	0	0	
39.	Pennsylvania PA	N	0	0	0	0	0	0	0	
	Rhode Island RI	N	0	0	0	0	ļ0	0	0	
	South Carolina SC	N	0	0	0	0	0	0	0	
2.	South Dakota SD	N	0	0	0	0	0	0	0	
3.	Tennessee TN	N	0	0	0	0	0	0	0	
4.	Texas TX	N	0	0	0	0	0	0	0	
5.	Utah UT	N	0	0	0	0	0	0	0	
6.	Vermont VT	N	0	0	0	J0	0	0	0	}
17.	Virginia VA	N	0	0	0	0	0	0	0	}
l8.	Washington WA		0	0	0	0	0	0	0	}
	West Virginia W\		0	0	0	0	0	0	0	
0.	Wisconsin WI	N	0	0	0	0	0	0	0	
	Wyoming WY		0	0	0	0	0	0	0	
	American Samoa AS	N	0	0	0	0	0	0	0	
3.	Guam GU	N	0	0	0	0	ļ	0	0	
	Puerto Rico PR	N	0	0	0	0	t0	0	ļū	
	U.S. Virgin Islands VI	N	0	0	0	0	0	0	0	
6.	Northern Mariana Islands MP	N	0	0	0	0	0	0	0	
57.	Canada CA		0	0	0	0	0	0	0	
	Aggregate Other									
	Aliens OT	XXX	0	0	0	0	0	0	0	ļ
9.	Subtotal	xxx	0	0	0	0	0	0	0	
60.	Reporting Entity Contributions for Employ Benefit Plans	/ee XXX	0	0	0	0	0	0	0	
61.	Totals (Direct Business) DETAILS OF WRITE-INS	XXX	0	0	0	0	0	0	0	
001.		XXX								
002.		XXX								
003.		XXX				ļ				
98.	Summary of remaining write-ins for Line 58 from	XXX	0	0	0	0	0	0	0	
999.	Totals (Lines 58001 throu	gh		U	0	0	JU	0	0	
	58003 plus 58998)(Line 5 above)	8 XXX	0	0	0	0	0	0	0	

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

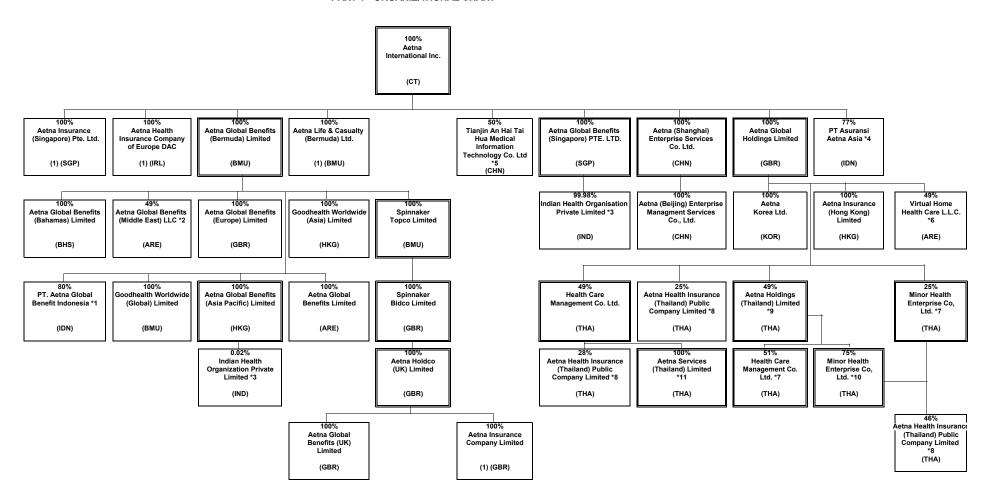


(1) Insurers/HMO's

Percentages are rounded to the nearest whole percent and based on ownership of voting rights. Double borders indicate entity has subsidiaries shown on the same page. Bold borders indicate entity has subsidiaries shown on a separate page.

 $^{^{\}star}$ PHPSNE Parent Corporation is also 45% owned by third parties.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



^{*1} PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.

^{*2} Aetna Global Benefits (Middle East) LLC is also 51% is owned by Euro Gulf LLC, Aetna's Nominee.

^{*3} Indian Health Organisation Private Limited is 0.019857% owned by Aetna Global Benefits (Asia Pacific) and 99.980143% owned by Aetna Global Benefits (Singapore) PTE. LTD.

^{*4} PT Asuransi Aetna Asia is also 23% owned by PT Asuransi Central Asia.

^{*5} Tianjin An Hai Tai Hua Medical Information Technology Co., Ltd is also 50% owned by Tianjin Hai Tai Group Co., Ltd

^{*6} Virtual Home Health Care L.L.C. is also 51% owned by CBD Commercial Brokers LLC

^{*7} Health Care Management Co. Ltd. Is also owned by Aetna Global Benefits (Bermuda) Limited (1 share).

^{*8} Aetna Health Insurance (Thailand) Public Company Limited is also owned by Aetna Global Benefits (Bermuda) Limited (1 share), Mr. Sansanapongpherchar (1 Share),

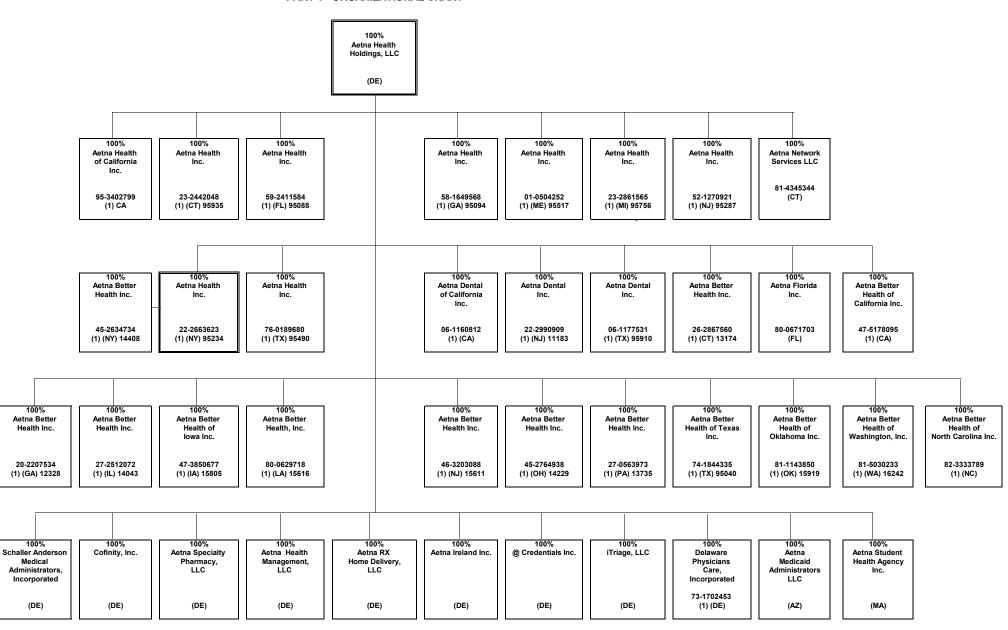
Mr. Jitphasong Itsaraphakded (1 Share); Mrs. Suphee Wattana (1 Share); and Mr. Buncha Tamphragom (1 Share)

^{*9} Aetna Holdings (Thailand) Limited is aslo 51% owned by Mr. Paiboon Sutantivorakoon plus Aetna Benefits (Bermuda) Limited owns 1 share.

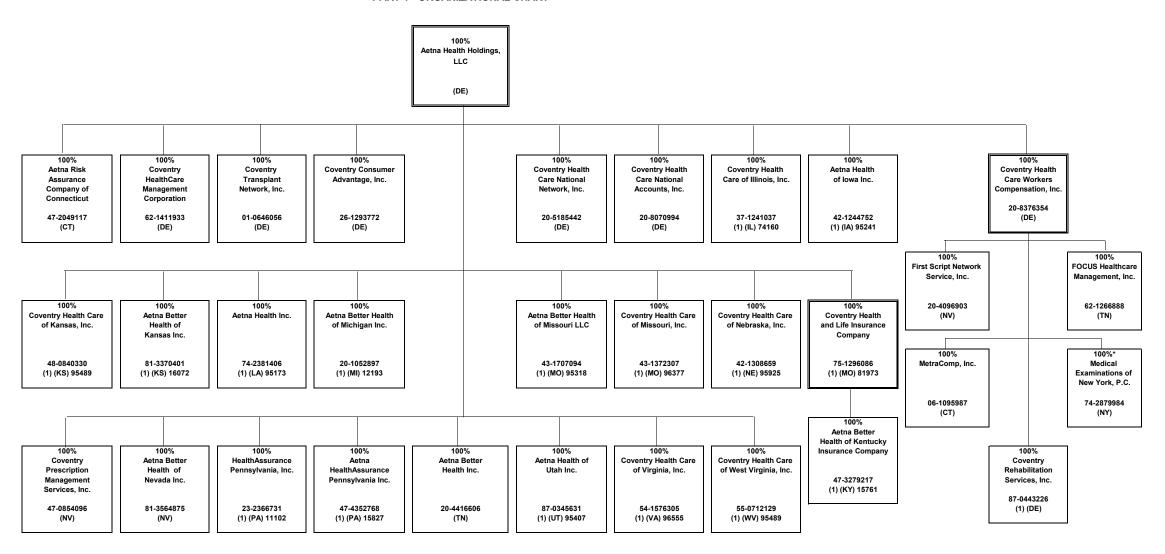
^{*10} Minor Health Entreprise Co, Ltd is is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited

^{*11} Aetna Services (Thailand) Limited is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

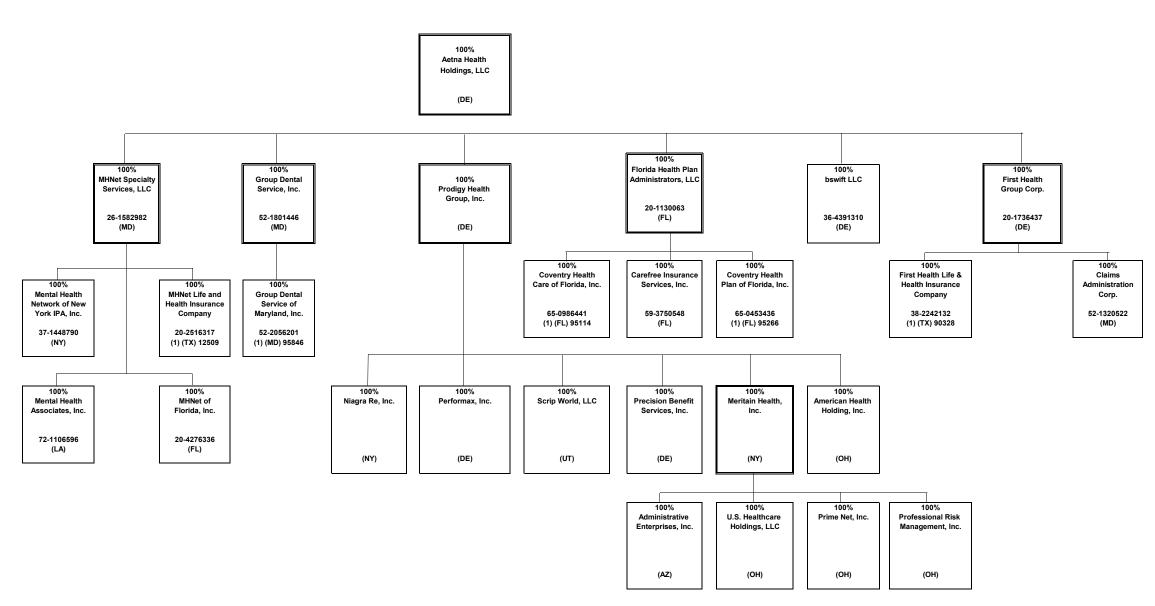


SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

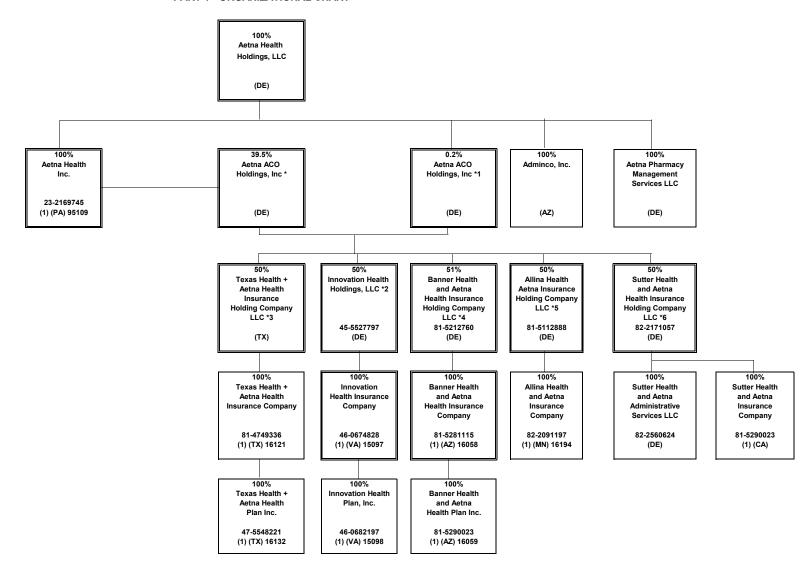


^{*100%} owned through Aetna's nominees

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



^{*1} Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).

^{*2} Innovation Health Holdings, LLC is also 50% owned by Inova Health System Foundation.

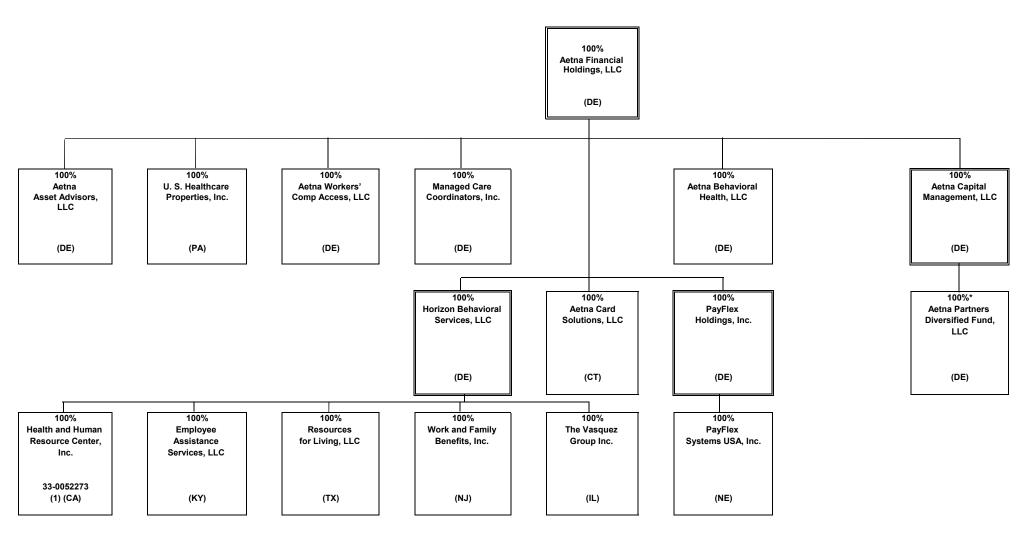
^{*3} Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.

^{*4} Banner Health and Aetna Health Insurance Holding Company LLC is also 49% owned by Banner Health.

^{*5} Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.

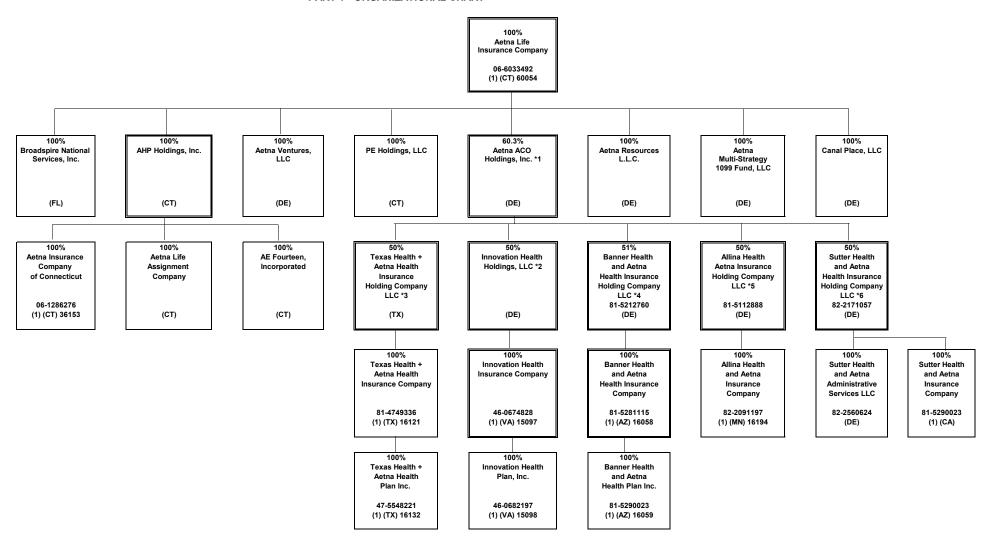
^{*6} Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



^{*} Aetna Life Insurance Company, Aetna Health and Life Insurance Company and Aetna Health Management, LLC own substantially all of the non-managing member interests of Aetna Partners Diversified Fund, LLC.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



^{*1} Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).

^{*2} Innovation Health Holdings, LLC is also 50% owned by Inova Health System Foundation.

^{*3} Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.

^{*4} Banner Health and Aetna Health Insurance Holding Company LLC is also 49% owned by Banner Health.

^{*5} Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.

^{*6} Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.

SCHEDULE Y

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						Name of Securities		<u> </u>	Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
0001	AETNA INC.	00000	23-2229683	3060706	0001122304	N	Aetna Inc.	PA	UIP	Aetna Inc.		0.000		N	0
0001	AETNA INC.	00000	30-0123754	0	0		Aetna Health Holdings, LLC	DE	UDP	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	95-3402799	0	0		Aetna Health of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95935	23-2442048	0	0		Aetna Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95088	59-2411584	0	0		Aetna Health Inc.	FL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95094	58-1649568	0	0		Aetna Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95517	01-0504252	0	0		Aetna Health Inc.	ME	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95756	23-2861565	0	0		Aetna Health Inc.	MI	RE	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95287	52-1270921	0	0		Aetna Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	95234	22-2663623	0	0		Aetna Health Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	14408	45-2634734	0	0		Aetna Better Health Inc.	NY	IA	Aetna Health Inc. (NY)	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	95490	76-0189680	0	0		Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	95040	74–1844335	0	0		Aetna Better Health of Texas Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	12328	20-2207534	0	0		Aetna Better Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	06-1160812	0	0		Aetna Dental of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	11183	22-2990909	0	0		Aetna Dental Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC	95910	06–1177531	0	0		Aetna Dental Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	00000	30-0123760	0	0		Aetna Rx Home Delivery, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	00000	13-3670795	0	0		Aetna Health Management, LLC	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc		0
0001	AETNA INC.	00000	22-3187443	0	0		Aetna Ireland Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	57-1209768	0	0		Aetna Specialty Pharmacy, LLC	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	00000	20-1274723	0	0		Cofinity, Inc.	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	23-2671370	0	0		@Credentials Inc.	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc		0
0001	AETNA INC.	00000		0	0		Aetna Services (Thailand) Limited	THA	NIA	Health Care Management Co. Ltd	Ownership	100.000	Aetna Inc.	N	20
0001	AETNA INC.	13735	27-0563973	0	0		Aetna Better Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc		0
0001	AETNA INC.	13174	26-2867560	0	0		Aetna Better Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC	00000	47–5178095	0	0		Aetna Better Health of California Inc	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	14043	27-2512072	0	0		Aetna Better Health Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	15805	47–3850677	0	0		Aetna Better Health of Iowa Inc.	IA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	15616	80-0629718	0	0		Aetna Better Health, Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	00000	80-0671703	0	0		Aetna Florida Inc.	FL	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	14229	25-2764938	0	0		Aetna Better Health Inc.	OH	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	15611	46-3203088	0	0		Aetna Better Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	15919	81-1143850	U	0		Aetna Better Health of Oklahoma Inc.	OK	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	00000	04-2708160	U	0		Aetna Student Health Agency Inc.	MA	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	73-1702453	0	0		Delaware Physicians Care, Incorporated	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	LETU 1110						Schaller Anderson Medical Administrators,	25		l	l	400.00-	1		
0001	AETNA INC.	00000	01-0826783	0	0		Incorporated	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	86-0842559	U	0		Aetna Medicaid Adminstrators LLC	AZ	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	45-2944270	U	U		iTriage, LLC	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	16-1471176	Ü	0		Prodigy Health Group, Inc.	DE	NIA NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	NY	0
0001	AETNA INC.	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	DE		Aetna Health Holdings, LLC	Ownership	0.200			3
0001	AETNA INC.		45-5527797	0	0		Innovation Health Holdings, LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	50.000	Aetna Inc.	N	6
0001	AETNA INC.	15097	46-0674828	U	0		Innovation Health Insurance Company	VA	IA	Innovation Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	V
0001	AETNA INC.	15098	46-0682197	U	U		Innovation Health Plan, Inc Texas Health + Aetna Health Insurance Holdi	VA	IA	Innovation Health Insurance Company	Ownership	100.000	Aetna Inc.	N	V
0001	AETNA INC.	00000	01 0700057	0	0			ng TX	NIA	Astro ACO Haldings Inc	Ownership	50.000	lastra Inc	M	q
0001	AETNA ING.		81–3789357	U	V		Company LLC Texas Health + Aetna Health Insurance Compa		NIA	Aetna ACO Holdings, Inc.	_ uwner snip	000.00	Aetna Inc.	N	y
0001	AETNA INC.	16121	81-4749336	0	0		rexas mearin + Aeina Mearin Insurance Compar	ny TX	IΔ	Texas Health + Aetna Health Insurance	Ownership	100.000	Aetna Inc.	N	
ויטטע	AETNA INU.	16121	61-4/49336	· · · · · · · · · · · · · · · · · · ·	۰			1 X	IA	Holding Company LLC	Uwnersnip	100.000	Aetha Inc.	N	V
0001	AETNA INC.	16132	47-5548221	0	0		Texas Health + Aetna Health Plan Inc.	TX	IΔ	Texas Health + Aetna Health Insurance Company	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95109	23-2169745	۰	0		lexas Health + Aetha Health Plan Inc	X PA	IA	Aetna Health Holdings, LLC	Ownership.	100.000	Aetna Inc.	N	v
0001	AETNA INC.	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	PA DE	NIA	Aetna Health Inc. (PA)	Ownership	39.500	Aetna Inc.	Y	v
0001	AETNA INC.	00000	20-0438576	٠	0		Niagara Re, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership		Aetna Inc.	YN	د
UUU I	In⊏IINA IIN∪	00000	., 40-04000/0		V		INTAYATA NE, THE.	INI		I i i ou i gy meaith Gioup, Inc.	Lowingt 2111h	100.000	Notina THC	NN	V

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						Name of Securities			Relation-		Board,	Owner-		SCA	
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		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
	VA INC	00000	52-2200070	0	0		Performax, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	N	0
	VA INC	00000	87-0632355	0	0		Scrip World, LLC	UT	NI A	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	N	0
	NA INC	00000	27-1760756	0	0		Precision Benefit Services, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	N	0
	A INC	00000	31–1368946	0	0		American Health Holding, Inc.	H	NI A	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	N	0
	√A INC	00000	16-1264154	0	0		Meritain Health, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	N	0
	NA INC		86-0537707	0	0		Adminco, Inc.	AZ	NI A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	VA INC		86-0527428	0	0		Administrative Enterprises, Inc.	AZ	NI A	Meritain Health, Inc.	Ownership	100.000	Aetna Inc		0
	VA INC	00000	16-1684061	0	0		U.S. Healthcare Holdings, LLC	H	NIA	Meritain Health, Inc.	Ownership	100.000	Aetna Inc.	N	0
	VA INC	00000	34-1670299	0	0		Prime Net, Inc.	H	NI A	Meritain Health, Inc.	Ownership	100.000	Aetna Inc	N	0
.0001 AETN	NA INC.	00000	34–1348032	0	0		Professional Risk Management, Inc.	H0	NIA	Meritain Health, Inc.	Ownership	100.000	Aetna Inc	N	0
l			L	L	L		Continental Life Insurance Company of			l			L		
0001 AETN	WA INC	68500	62-1181209	0	0		Brentwood, Tennessee	TN	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
										Continental Life Insurance Company of					
	A INC.		20–2901054	0	0		American Continental Insurance Company	TN	IA	Brentwood, Tennessee	Ownership	100.000	Aetna Inc.		0
	NA INC.		06-6033492	0	0		Aetna Life Insurance Company	CT	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.		<u>.</u>
	NA INC.	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	DE	NIA	Aetna Life Insurance Company	Ownership	60.300	Aetna Inc.	Y	3
	NA INC.	00000	06–1270755	0	0		AHP Holdings, Inc.	CT	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	N	0
	NA INC.		06–1286276	0	0		Aetna Insurance Company of Connecticut	CT	IA	AHP Holdings, Inc.	Ownership	100.000	Aetna Inc.		0
	WA INC		06-1028469	0	0		AE Fourteen, Incorporated	CT	NI A	AHP Holdings, Inc.	Ownership	100.000	Aetna Inc.		0
	WA INC		06-1373153	0	0		Aetna Life Assignment Company	CT	NIA	AHP Holdings, Inc.	Ownership	100.000	Aetna Inc.	N	0
	WA INC		. 20-3678339	0	0		PE Holdings, LLC	CT	NI A	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	N	0
	NA INC.		06-1423207	0	0			DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.		0
	VA INC	00000	20-3180700	0	0		Canal Place, LLC	DE	NI A	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.		0
	** ************************************	00000	59-2108747	0	0		Aetna Ventures, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	NN	0
	VA INC.		59-2108747	0	0001552250		Broadspire National Services, Inc	FL DE	NIA NIA	Aetna Life Insurance Company	Ownership	79.250	Aetna Inc.		0
	VA INC.		41-2035961	0	000 1002200		Aetna Financial Holdings, LLC	DE	NIA	Aetna Inc.	Ownership.	100.000	Aetna Inc.		0
	VA INC.	00000	26-2030792	0	0		Aetna Asset Advisors, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.		0 0
	VA INC.		23-2354500	0	0		U.S. Healthcare Properties, Inc.	PA	NIA	Aetna Financial Holdings, LLC	Ownership.	100.000	Aetna Inc.		0
	VA INC.		38-3704481	0	0		Aetna Capital Management, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.		0
	VA INC.	00000	11-3667142	0	0001314522		Aetna Partners Diversified Fund, LLC	DE	NIA	Aetna Capital Management, LLC	Ownership	100.000	Aetna Inc.	N	1
	VA INC.	00000	20-0446676	0	0001314322		Aetna Workers' Comp Access. LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	VALING.	00000	20-0446713	0	0		Aetna Behavioral Health, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.		0
	VA INC.		23-2670015	0	0		Managed Care Coordinators, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.		0
	VA INC.	00000	59-3269144	0	0		Horizon Behavioral Services, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	VA INC.		61-1193498	0	0		Employee Assistance Services, LLC	KY	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.		0
	VA INC.		33-0052273	0	0		Health and Human Resource Center, Inc.	CA	IA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.		0
	VA INC.		75-2420973	0	0		Resources for Living, LLC	TX	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.		0
	VA INC.	00000	36-3681261	0	0		The Vasquez Group Inc.	IL	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	N	0
	VA INC.	00000	22-3178125	0	0		Work and Family Benefits. Inc.	NJ	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	N N	0
	NA INC.		27-1773021	0	0		Aetna Card Solutions, LLC	CT	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.		0
	VA INC.		20-5216478	0	0		PayFlex Holdings, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.		0
	VA INC.	00000	91–1774434	0	0		PayFlex Systems USA, Inc.	NE	NIA	PayFlex Holdings, Inc.	Ownership	100.000	Aetna Inc.		0
	NA INC		06-0876836	0	0		Aetna Health and Life Insurance Company	CT	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.		0
	VA INC.		23-2710210	0	0		Aetna Health Insurance Company	PA	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.		0
	NA INC	84450	57-0805126	0	0		Aetna Health Insurance Company of New York	NY	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	00000	06-1571642	0	0		Aetna International Inc.	CT	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
.0001 AETN	VA INC	00000	98-0211470	0	0		Aetna Life & Casualty (Bermuda) Ltd	BMU	IA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	00000	.]	0	0		Aetna Insurance (Singapore) PTE. LTD	SGP	IA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	N	0
	VA INC			0	0		Aetna Global Benefits (Bermuda) Limited	BMU	NIA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	N	0
	NA INC.			0	0		Goodhealth Worldwide (Global) Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	N	0
	VA INC	00000		0	0		Aetna Global Benefits (Europe) Limited	GBR	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	N	0
.0001 AETN	VA INC			0	0		Goodhealth Worldwide (Asia) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.		0
0001 AETN	NA INC.	00000		0	0	1	Aetna Global Benefits Limited	ARF	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	N	0

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Column C		Owner Name				OII	(0.3. 0)									
April 1985 M.				Number	RSSD	CIK	international)					,				<u> </u>
Anno 1000 Sept. 101					0	0										4
Active Color Col	0001	AETNA INC.	00000		0	0			ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	49.000	Aetna Inc	N	5
April Color Colo								Aetna Global Benefits (Asia Pacific) Limited								i l
Service 1900					0	0				NIA		Ownership			N	0
Active Notes Composition	0001	AETNA INC.	00000		0	0		Spinnaker Topco Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	N	0
Active Notes Composition	0001	AETNA INC.	00000		0	0		Spinnaker Bidco Limited	GBR	NIA	Spinnaker Topco Limited	Ownership	100.000	Aetna Inc.	N	0
Fifth No.	0001	AETNA INC.	00000		0	0		Aetna Holdco (UK) Limited	GBR	NIA	Spinnaker Bidco Limited	Ownership	100.000	Aetna Inc.	N	0
APPA NO. 1900 190		AFTNA INC	00000		0	0				NIA		Ownership	77 000	Aetna Inc	N.	13
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ACTIVATION ACT	1 000 1	METRIA TING.	00000		U	υ			INU	NIA	LIMITEU	Owner Strip	J.U2U	Aetha Inc.	N	4
Auto Service Co. Ltd. Co. Co.	2004	15TH 1110				•		Aetha Health Insurance Company of Europe DAC					400.000	l		
APPA MAR All Part All Par	0001	ALINA INC.	00000		U	U			IKL	IA	Aetna International Inc.	Uwnership	100.000	Aetna Inc.	N	0
APTA NR.								Aetna (Shanghai) Enterprise Services Co. Ltd.								i l
APPN NR. D0000 0 0 Services Co., 1.05 D4N MA L16 Description D0000 D00000 D0000 D00000 D00000 D00000 D00000 D0000 D00000 D00000 D0000 D0000 D0000	0001	AETNA INC.	00000		0	0			CHN	NIA		Ownership	100.000	Aetna Inc.	N	0
APPN NR. D0000 0 0 Services Co., 1.05 D4N MA L16 Description D0000 D00000 D0000 D00000 D00000 D00000 D00000 D0000 D00000 D00000 D0000 D0000 D0000								Aetna (Beijing) Enterprise Management			Aetna (Shanghai) Enterprise Services Co.					i l
Color APTA M.C.	0001	AETNA INC.	00000		0	0		Services Co., Ltd.	CHN	NIA	Ltd	Ownership	100.000		N	0
Dot APRIL INC Dot Dot	0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Singapore) PTE, LTD.	SGP	NIA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	N	0
EPAN INC. 0,0000 0 Indian Health Organization Private Limited MD NIA Extension 0,0000 22-257885 0 0 ARSK Holdings Limited SRR NIA Actas International Inc. 0,0000 45 has inc 1,0000 45								3-1								
APPL NRC 0.0000 22-67886 0 0 APPL Holdings, Inc.	0001	AFTNA INC	00000		0	0		Indian Health Organisation Private Limited	IND	NIA		Ownership	99 980	Aetna Inc	N	2
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DOOD AETNA INC. DOOD D	0001	AETNA INC.	00000	51-0029326	0	0		ASI Wings. LLC	DE	NI A	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
DOOI AETNA INC. DOOD AETNA INC. DOOD DOOD DOOD AETNA INC. DECENTRY Health and Life Insurance Company DOOD AETNA INC. DOOD				l	0	0				NIA				Aetna Inc.	N.	0
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AeTNA INC 15761 47-3279217 0 AeTNA INC 00000 52-1801445 0 0 0 0 Group Dental Service, Inc MD NIA Aetna Health Holdings, LLC Ownership 100.000 Aetna Inc J. D.				75-1296086	0	0					Aetna Health Holdings IIC				N	0
DODI AETNA INC. 15761 47-3279217 0 0 0 Company KY. I.A. Ownership. 100.000 Aetna Inc. J.		1110.			-	•										
Description AETNA INC. Description D	0001	AETNA INC	15761	47_3270217	ا	0			ΚV	LA	OUVERTED THEATTH AND LITE THOUSAIDE COMPANY	Ownership	100,000	Actna Inc	N	0
DOOI AETNA INC. 95846 52-2056201 0 0 0 Group Dental Service of Maryland, Inc. MD IA Group Dental Service, Inc. Ownership 100.000 Aetna Inc. J.					0	0					Astro Health Heldings IIC	•				
Description				52-1801440	0	0			MD							0
DO01 AETNA INC. 95241 42-1244752 0 0 O Aetna Health of Iowa Inc. IA IA Aetna Health Holdings, LLC Ownership. 100.000 Aetna Inc. J.			ყებ846		0	U										0
DO01 AETNA INC. D000 AFTNA INC. D000 AFTNA INC. D000 AETNA INC. D000					U	U									N	0
Aetna Risk Assurance Company of Connecticut Inc.					0	0									N	0
DO01 AETNA INC. D0000 47-2049117 0 0 0 Inc. CT IA Aetna Health Holdings, LLC Ownership. D0000 Aetna Inc. J.	0001	AETNA INC	95925	42-1308659	0	0			NE	ļI A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
DO01 AETNA INC. 95173 74-2381406 0 0 O Aetna Health Inc. LA IA Aetna Health Holdings, LLC Ownership. 100.000 Aetna Inc. J.				1					l			1	1			į I
DODI AETNA INC. 11102 23-2366731 0 0 0 HealthAssurance Pennsylvania, Inc. PA IA Aetna Health Holdings, LLC Ownership. 100.000 Aetna Inc. J.					0	0									N	0
Covertry Prescription Management Services, 10.000 47-0854096 0 0 0 10.000 Aetna Inc. 10.000					0	0				IA					N	0
0001 AETNA INC. 00000 47-0854096 0 0 0 Coventry Prescription Management Services, Inc. NV NIA Aetna Health Holdings, LLC 0 0 0 0 0 0 0 0 0	0001	AETNA INC	11102	23-2366731	0	0		HealthAssurance Pennsylvania, Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0.001 AETNA INC. 0.0000 47-0854096 0 0 0 Inc. NV NIA Aetna Health Holdings, LLC 0wnership. 100.000 Aetna Inc. J.											y .					1 1
.0001 AETNA INC. 16148 81-3564875 0 0 0 Aetna Better Health of Nevada Inc. NV I.A. Aetna Health Holdings, LLC 0 wnership. 100.000 Aetna Inc. J .0001 AETNA INC. .96555 54-1576305 0 0 0 Coventry Health Care of Virginia, Inc. VA I.A. Aetna Health Holdings, LLC 0 wnership. 100.000 Aetna Inc. J .0001 AETNA INC. .00000 01-0646056 0 0 0 Coventry Transplant Network, Inc. DE NIA Aetna Health Holdings, LLC Ownership. 100.000 Aetna Inc. J	0001	AETNA INC.	00000	47-0854096	0	0			NV	NI A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.0001 AETNA INC. .96555 .54-1576305 0 0 Coventry Health Care of Virginia, Inc. VA IA. Aetna Health Holdings, LLC Ownership. .100.000 Aetna Inc. .0001 .AETNA INC. .00000 .01-0646056 0 0 </td <td></td> <td></td> <td></td> <td></td> <td>0</td> <td>0</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>N.</td> <td>0</td>					0	0									N.	0
0001 AETNA INC. 0000 01-0646056 0 0 Coventry Transplant Network, Inc. DE NIA Aetna Health Holdings, LLC 0wnership 100.000 Aetna Inc. 1					0	0				····					N	0
					0	0		Coventry Transplant Network Inc.							N	0
	0001	AETNA INC.	96377	43-1372307	0	0		Coventry Health Care of Missouri, Inc.	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N.	
Lucon Inc. Inc. Inc. Inc. Inc. Inc. Inc. Inc	I DUU	ALINA INU.	JUS//	1-10-1012001	ν	v		OUVERLITY REALTH GATE OF MISSOUFF, INC.	IWU	ļIA	netha nearth norunnys, LLC	Owner Still		netha IIIC.	INL	V

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Group		Company	ID	Federal		(U.S. or	Parent. Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
0001	AETNA INC.	95318	43-1702094	nood	n Oik	international)	Aetna Better Health of Missouri LLC	MO	IA	Aetna Health Holdings, LLC	Ownership	100,000	Aetna Inc.	N	0
0001	AETNA INC.	95408	55-0712129	0	0		Coventry Health Care of West Virginia, Inc	WV	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	9
0001	AETNA INC.	00000	62-1411933	0	0		Coventry HealthCare Management Corporation	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N.	0
0001	AETNA INC.	15827	47-4352768	0	0		Aetna HealthAssurance Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
_0001	AETNA INC.	95489	48-0840330	0	0		Coventry Health Care of Kansas, Inc.	KS	I A	Aetna Health Holdings, LLC	Ownership	_100.000	Aetna Inc.	N.	0
0001	AETNA INC.	16072	81-3370401	0	0		Aetna Better Health of Kansas Inc.	KS	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	12193	20-1052897	0	0		Aetna Better Health of Michigan Inc	MI	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95407	87-0345631	0	0		Aetna Health of Utah Inc.	UT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	20-4416606	0	0		Aetna Better Health Inc.	TN	NI A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	74160	37–1241037	0	0		Coventry Health Care of Illinois, Inc	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
					L	1	Coventry Health Care National Accounts, Inc.		l		l	400.00-	I		
0001	AETNA INC.	00000	20-8070994	0	0			DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	20-5185442	0	0		Coventry Health Care National Network, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0 0
0001	AETNA INC.	00000	26-1293772	0	0		Coventry Consumer Advantage, Inc.	UE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetha inc.	N	V
0001	AETNA INC.	00000	20-8376354	0	0		Coventry Health Care Workers Compensation,	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
1 000	AETNA TNO.		20-63/6334	0	0		mc.	UE	INI A	Coventry Health Care Workers' Compensation	ownership		Aetha inc.		
0001	AETNA INC.	00000	20-4096903	0	0		First Script Network Service, Inc.	NV	NIA	Inc.	Ownership	100.000	Aetna Inc.	N	0
	/ILIW 110.		1000000	•	·		The compendence convice, me.			Coventry Health Care Workers' Compensation	omoromp		Thorna Tho.		
0001	AETNA INC.	00000	06-1095987	0	0		MetraComp, Inc.	CT	NIA	Inc.	Ownership.	100.000	Aetna Inc.	N.	0
			1				, , , , , , , , , , , , , , , , , , , ,			Coventry Health Care Workers' Compensation					1
0001	AETNA INC.	00000	74-2879984	0	0		Medical Examinations of New York, P.C.	NY	NI A	Inc	Ownership	100.000	Aetna Inc.	N	8
										Coventry Health Care Workers' Compensation	,				
0001	AETNA INC.	00000	62-1266888	0	0		FOCUS Healthcare Management, Inc.	TN	NIA	Inc.	Ownership	100.000	Aetna Inc.	N	0
										Coventry Health Care Workers' Compensation	,				
0001	AETNA INC.	00000	87-0443226	0	0		Coventry Rehabilitation Services, Inc	DE	NIA	Inc	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	20–1736437	0	0		First Health Group Corp.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
2004	1571 INC						First Health Life & Health Insurance Company			F		400.000			
0001	AETNA INC.	90328	38-2242132	0	0		01-1 Ad-1-1-441 0	TX	IA	First Health Group Corp.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	52-1320522 20-1130063	0	0		Claims Administration Corp	MD	NIA	First Health Group Corp	Ownership	100.000	Aetna Inc.	N N	0
0001	AETNA INC.	95114	65-0986441	0	0		Coventry Health Care of Florida, Inc.	FL	NIA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	NN.	0
0001	AETNA INC.	95266	65-0453436	0	0		Coventry Health Plan of Florida, Inc.	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	59-3750548	0	0		Carefree Insurance Services, Inc.	FL	NIA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	36-4391310	0	0		bswift LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000]	0	0		Virtual Home Healthcare L.L.C.	ARE	NIA	Aetna Global Holdings Limited	Ownership	49.000	Aetna Inc.	N	17
0001	AETNA INC.	00000	26-1582982	0	0		MHNet Specialty Services, LLC	MD	NIA	Aetna Health Holdings, LLC	Ownership.	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	37-1448790	0	0		Mental Health Network of New York IPA, Inc	NY	NIA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	12509	20-2516317	0	0		MHNet Life and Health Insurance Company	TX	IA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	72-1106596	0	0		Mental Health Associates, Inc.	LA	NIA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	20-4276336	0	0		MHNet of Florida, Inc.	FL	IA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	16242	. 81–5030233	0	0		Aetna Better Health of Washington, Inc	WA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	l				L		Banner Health and Aetna Health Insurance				L		I		
0001	AETNA INC	00000	81–5212760	0	0		Holding Company LLC	DE	NI A	Aetna ACO Holdings, Inc.	Ownership	51.000	. Aetna Inc.	N	10
0004	AETHA ING	40050	04 5004445		I.		Banner Health and Aetna Health Insurance			Banner Health and Aetna Health Insurance		400.000		.,	
0001	AETNA INC	16058	81–5281115	0	0		Company	AZ	I A	Holding Company LLC	Ownership	100.000	Aetna Inc	N	0
0004	AETNA INC.	16059	81-5290023	0			Danney Health and Astro Health Dies I	AZ	1.4	Banner Health and Aetna Health Insurance	Ownership	100.000	Astro Inc	N	0
0001	AETNA TNO.	60009	0 1-0290023	U	U		Banner Health and Aetna Health Plan Inc Allina Health and Aetna Health Insurance	AZ	IA	Company	Ownership	100.000	Aetna Inc	N	U
0001	AETNA INC.	00000	81-5112888	0	l ₀	1	Holding Company LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership.	50.000	Aetna Inc.	N	11
1 000 1	ALINA INC		01-0112000	0	·		norumy company LLC	UE	NI A	Allina Health and Aetna Health Insurance	owner strip	00.000	Actila IIIC.	IN	!!
0001	AETNA INC.	16194	82-2091197	0	0		Allina Health and Aetna Insurance Company	MN	IA	Holding Company LLC	Ownership.	100.000	Aetna Inc.	N	0
			2 2001107				Sutter Health and Aetha Insurance Holding			norm g company LLC			110.		
0001	AETNA INC.	00000	82-2171057	0	0		Company LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	50.000	Aetna Inc.	N	12
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						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary			Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-		Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	,
Code	Croup Name		Number	RSSD	CIK	International)	Or Affiliates	tion	Entity		Other)		3	(Y/N)	*
Code	Group Name	Code	Number	หออบ	CIK	international)	Sutter Health and Aetna Administrative	tion		(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/IN)	+
0001	AETNA INC.	00000	82-2560624	0	0		Services LLC	DE		Sutter Health and Aetna Insurance Holding Company LLC	Ownership	100 000	Aetna Inc.	NI.	
1 000 1	AETNA TNC.	00000	02-2000024	0	0		Services LLC	UE		Sutter Health and Aetna Insurance Holding	owner snip	100.000	Aetha inc.	IN	V
0001	AETNA INC	00000	81-5290023	0	0		Sutter Health and Aetna Insurance Company	CA		Company LLC	Ownership	100 000	Aetna Inc.	N	0
0001	AETNA INC.	00000	01-3290023	0	0		Aetna Holdings (Thailand) Limited	THA		Aetna Global Holdings Limited	Ownership		Aetna Inc.	N	14
1 000	ALINA INC	90000		0	0		Aetna Health Insurance (Thailand) Public		NIA	Actila diobal holdings Limited	owner strip	43.000	Actila IIIc.		14
0001	AETNA INC.	00000		0	0		Company Limited	THA	NIA	Aetna Global Holdings Limited	Ownership	25,000	Aetna Inc.	N	15
1000	ALINA INC.			0	0		Aetna Health Insurance (Thailand) Public			Actia diobai ibidings Eliiited	owner strip	20.000	Actila ilic.		
0001	AETNA INC.	00000		0	0		Company Limited	THA	NIA	Minor Health Entreprise Co. Ltd.	Ownership	46 000	Aetna Inc.	N	15
	//LINK 110.				•		Aetna Health Insurance (Thailand) Public			minor nourth Entropriso oo, Eta:	omici dirip		nother mo.		1
0001	AETNA INC	00000		0	0		Company Limited	THA	NIA	Health Care Management Co. Ltd.	Ownership	28.000	Aetna Inc.	N	15
0001	AETNA INC.	00000		0	0		Health Care Management Co. Ltd.	THA		Aetna Global Holdings Limited	Ownership.		Aetna Inc.	N	19
	AETNA INC.	00000		0	0		Minor Health Entreprise Co. Ltd.	THA		Aetna Global Holdings Limited	Ownership	25.000	Aetna Inc.	N	16
0001	AETNA INC.	00000		0	0		Minor Health Entreprise Co, Ltd.	THA		Aetna Holdings (Thailand) Limited	Ownership	75.000	Aetna Inc.	N	16
1000	AETNA INC	00000		0	0		Health Care Management Co. Ltd	THA	NIA	Aetna Holdings (Thailand) Limited	Ownership		Aetna Inc.	N	19
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Bahamas) Limited	BHS		Aetna Global Benefits (Bermuda) Limited	Ownership		Aetna Inc.	N	0
	AETNA INC	00000		0	0		Aetna Pharmacy Management Services LLC	DE		Aetna Health Holdings, LLC	Ownership		Aetna Inc.	N	0
0001	AETNA INC.	00000	82-3333789	0	0		Aetna Better Health of North Carolina Inc	NC	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
		1					Tianjin An Hai Tai Hua Medical Information								
0001	AETNA INC.	00000		0	0	l	Technology Co., Ltd	CHN	NIA	Aetna International Inc.	Ownership	50.000	Aetna Inc.	N	18

Asterisk	Explanation
1	Aetna Life Insurance Company, Aetna Health and Life Insurance Company and Aetna Health Management, LLC own substantially all of the non-managing membership interests.
2	Indian Health Organisation Private Limited is 0.019857% owned by Aetna Global Benefits (Asia Pacific) and 99.980143% owned by Aetna Global Benefits (Singapore) PTE. LTD.
3	Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).
4	PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.
5	Aetna Global Benefits (Middle East) LLC is also 51% owned by Euro Gulf LLC, Aetna's Nominee.
	Innovation Health Holdings LLC. Is also 50% owned by Inova Health System Foundation.
7	PHPSNE Parent Corporation is 55% owned by AUSHC Holdings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership.
	Medical Examinations of New York, P.C. is 100% owned through Aetna's nominees.
	Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.
	Banner Health and Aetna Health Insurance Holding Company LLC is also 49% owned by Banner Health.
	Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.
	Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.
	PT Asuransi Aetna Asia is also 23% owned by PT Asuransi Central Asia.
	Aetna Holdings (Thailand) Limited is also 51% owned by Mr. Paiboon Sutantivorakoon plus Aetna Global Benefits (Bermuda) Limited owns 1 share
	Aetna Health Insurance (Thailand) Public Company Limited is also owned by Aetna Global Benefits (Bermuda) Limited (1 share), Mr. Sansanapongpherchar (1 share); Mrs. Suphee Wattana (1 share); and Mr. Buncha Tamphragom (1 share)
	Minor Health Entreprise Co, Ltd is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited.
	Virtual Home Health Care L.L.C. is also 51% owned by CBD Commercial Brokers LLC.
	Tianjin An Hai Tai Hua Medical Information Technology Co., Ltd is also 50% owned by Tianjin Hai Tai Group Co., Ltd.
	Health Care Management Co. Ltd. Is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited.
20	Aetna Services (Thailand) Limited is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

		_	Response
1.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and t	he NAIC with this statement?	NO
	Explanation:		
1.	The data for this supplement is not required to be filed.		
1.	Bar Code: Medicare Part D Coverage Supplement [Document Identifier 365]		

OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted ying ying		
7.	Deduct current year's other than temporary impairment recognized		
8.	Deduct current year's depreciation		
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	* *	1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year	-	
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage in the st parameter amortization of premium and mortgage in the state of the s		
9.	Total foreign exchange change in book value/recorded investment exchange accrued terest		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	Other Long Term invested 7650ts	1	2
		'	Prior Year Ended
		Year to Date	December 31
			December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
		'	Prior Year Ended
		Year to Date	December 31
-			
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	1,151,228	1,152,065
2.	Cost of bonds and stocks acquired		0
3.	Accrual of discount	0	0
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	0	0
6.	Deduct consideration for bonds and stocks disposed of	0	0
7.	Deduct amortization of premium	633	837
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	1, 150, 595	1, 151,228
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	1,150,595	1,151,228

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation.

	During the Current Quarter fo					•		
	1 Book/Adjusted	2	3	4	5 Book/Adjusted	6 Book/Adjusted	/ Book/Adjusted	8 Book/Adjusted
	Carrying Value	Acquisitions	Dispositions	Non-Trading Activity	Carrying Value	Carrying Value	Carrying Value	Carrying Value
	Beginning	During	During	During	End of	End of	End of	December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
1. NAIC 1 (a)	1,520,737	1,516,035	1,507,000	1.614	1,521,712	1,520,737	1,531,386	1,526,018
2. NAIC 2 (a)		0	0	0	0	Λ	Λ	0
							0	
3. NAIC 3 (a)		0	0	0	0	0	0	0
4. NAIC 4 (a)		0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total Bonds	1,520,737	1,516,035	1,507,000	1,614	1,521,712	1,520,737	1,531,386	1,526,018
	7. 7	, , , , , , , , , , , , , , , , , , , ,	,- ,	,	, ,	, , , ,	, , , , ,	, ,
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
			0	0				0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6		0	0	0	0	0	0	0
14. Total Preferred Stock	_	0	0	0	0	0	0	0
		4 540 005	•	4 244	3	U 500 707		4 500 040
15. Total Bonds and Preferred Stock	1,520,737	1,516,035	1,507,000	1,614	1,521,712	1,520,737	1,531,386	1,526,018

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

SCHEDULE DA - PART 1

Short-Term Investments											
			1			2		3		4	5
		Bo Ca	Adju ng	ue		P	e	Actual C	Cost	Interest Collected Year-to-Date	Paid for Accrued Interest Year-to-Date
9199999 Totals						××					
			•				\blacksquare				

SCHEDULE DA - VERIFICATION

Short-Term Investments

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	8,694
2.	Cost of short-term investments acquired	0	18,048
3.	Accrual of discount	0	0
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	0	0
6.	Deduct consideration received on disposals	0	26,742
7.	Deduct amortization of premium	0	0
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	0
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	0	0

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards NONE

Schedule DB - Part B - Verification - Futures Contracts NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open **NONE**

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open NONE

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

NONE

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	(Odon Equivalents)	1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	376,422	354,912
2.	Cost of cash equivalents acquired	3,383,357	5 , 153 , 453
3.	Accrual of discount	4,647	2,951
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	0	0
6.	Deduct consideration received on disposals	3,380,763	5, 134,894
7.	Deduct amortization of premium	0	0
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	383,663	376,422
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	383,663	376,422

Schedule A - Part 2 - Real Estate Acquired and Additions Made **NONE**

Schedule A - Part 3 - Real Estate Disposed NONE

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made NONE

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

NONE

Schedule D - Part 3 - Long-Term Bonds and Stocks Acquired **NONE**

Schedule D - Part 4 - Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed Of NONE

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made NONE

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To **NONE**

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

Schedule E - Part 1 - Month End Depository Balances **NONE**

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

	Show investin	ients O	wned End of Curren	i Quarter				
1	2	3	4	5	6	7	8	9
						Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
	US TREASURY BILL		09/20/2018	1.974	10/11/2018	380,791	0	230
0199999. Subto	otal - Bonds - U.S. Governments - Issuer Obligations					380,791	0	230
	- U.S. Government Bonds					380.791	0	230
1099999. Total	- All Other Government Bonds					0	0	0
	- U.S. States. Territories and Possessions Bonds					0	0	0
2499999 Total	- U.S. Political Subdivisions Bonds					0	0	0
3199999. Total	- U.S. Special Revenues Bonds					0	0	0
3899999 Total	- Industrial and Miscellaneous (Unaffiliated) Bonds					0	0	0
4899999 Total	- Hybrid Securities					0	0	0
5599999 Total	- Parent, Subsidiaries and Affiliates Bonds					0	0	0
	otal - SVO Identified Funds					0	ů	0
	- Issuer Obligations					380.791	0	230
	- Residential Mortgage-Backed Securities					0.000,731	Ů	0
	- Commercial Mortgage-Backed Securities					0	0	0
8000000 Total	- Other Loan-Backed and Structured Securities					0	0	0
	- SVO Identified Funds					0	0	0
8399999. Total						380.791	0	230
	FEDERATED INVESTORS INC TREASURY OBLIGATION FUND		00/07/00/0	0.000	XXX	380,791	0	230
			09/27/2018	0.000			2	
8599999. Subto	otal - Exempt Money Market Mutual Funds - as Identified by the SVO					2,872	2	11
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8899999 - Tota	Cash Equivalents					383.663	2	241
1110000 1010	· = =					000,000		47